

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Moving America Forward

ADDRESS (number and street)

471 Birchington Lane

☐Check if different
than previously
reported. (ACC)

Melbourne

FL

32940

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00375451

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☒October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mrs. Jennifer G. Mitchell

Signature of Treasurer

Electronically Filed by Mrs. Jennifer G. Mitchell

Date

10

11

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Moving America Forward

Report Covering the Period:

From:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 0 | 1 | 2 | 0 | 0 | 8 |

To:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 9 | 3 | 0 | 2 | 0 | 0 | 8 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 2008 | | 32810.60 |
| (b) Cash on Hand at Beginning of Reporting Period | 26956.20 | |
| (c) Total Receipts (from Line 19) | 43427.70 | 132277.70 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 70383.90 | 165088.30 |
| 7. Total Disbursements (from Line 31) | 60279.44 | 154983.84 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 10104.46 | 10104.46 |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Moving America Forward

Report Covering the Period:

From:

M M D D Y Y W Y
0 7 0 1 2 0 0 8

To:

M M D D Y Y W Y
0 9 3 0 2 0 0 8

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | 22750.00 | 59000.00 |
| (i) Itemized (use Schedule A) | 0.00 | 100.00 |
| (ii) Unitemized | 22750.00 | 59100.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 0.00 |
| (b) Political Party Committees | 20500.00 | 73000.00 |
| (c) Other Political Committees (such as PACs) | 43250.00 | 132100.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) | | |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 177.70 | 177.70 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 43427.70 | 132277.70 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 43427.70 | 132277.70 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | 0.00 | 0.00 |
| (i) Federal Share..... | | |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 35279.44 | 90983.84 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡ | 35279.44 | 90983.84 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 25000.00 | 64000.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 60279.44 | 154983.84 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 60279.44 | 154983.84 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 43250.00 | 132100.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 43250.00 | 132100.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 35279.44 | 90983.84 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 177.70 | 177.70 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 35101.74 | 90806.14 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 39

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Janis M. Bishop

Mailing Address 77 Pitts Bayshore Drive

City

Freeport

State

FL

Zip Code

32439

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C4971790

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Eric R. Braverman

Mailing Address 777 Cherry Hill Rd.

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Path Medical

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 8

Transaction ID: C4940474

Amount of Each Receipt this Period

2250.00

C.

Full Name (Last, First, Middle Initial)

Jill Collins-Farmer

Mailing Address 2912 W. Wallcraft Avenue

City

Tampa

State

FL

Zip Code

33611-1651

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phoenix House

Occupation

Board of Directors

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 8

Transaction ID: C4945581

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Dennis Kalevas

Mailing Address 380 Forest Street

City

Kearny

State

NJ

Zip Code

07032

FEC ID number of contributing
federal political committee.

C

Name of Employer
PathMedical

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 2 / 2 0 0 8

Transaction ID: C4939980

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

George A. Kellner

Mailing Address 900 Third Avenue Suite 1000

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kellner Dileo & Company

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 8

Transaction ID: C4952238

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Adam Kramer

Mailing Address 751 2nd Avenue

City

New York

State

NY

Zip Code

10017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 8

Transaction ID: C4952242

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 39

(check only one)

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Harley Lippman

Mailing Address 950 Third Avenue
26th FloorCity State Zip Code
New York NY 10022FEC ID number of contributing
federal political committee.

C

Name of Employer
Genesis 10Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 1 | 0 | | 2 | 0 | 0 | 8 |

Transaction ID: C4945630

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Edward D. Miller

Mailing Address 7 Sunset Lane

City State Zip Code
Garden City NY 11530FEC ID number of contributing
federal political committee.

C

Name of Employer
Phoenix HouseOccupation
fmr. President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 2 | 5 | | 2 | 0 | 0 | 8 |

Transaction ID: C4952240

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Ellen S. Richman

Mailing Address 340 Pemberwick Road

City State Zip Code
Greenwich CT 06831-4240FEC ID number of contributing
federal political committee.

C

Name of Employer
Pace UniversityOccupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 |

Transaction ID: C4945580

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Mitchell S. Rosenthal

Mailing Address 164 W 74th Street

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phoenix House

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 8

Transaction ID: C4945582

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Charles R. Shanklin

Mailing Address 1421 Rum Still Circle

City

Crestview

State

FL

Zip Code

32578

FEC ID number of contributing
federal political committee.

C

Name of Employer
Crestview Aerospace

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C4971788

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Paul Verkuil

Mailing Address Boies, Schiller & Flexnar
575 Lexington Avenue

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boies, Schiller & Flexnar

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 8

Transaction ID: C4940472

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Alonzo C. Whitner

Mailing Address 5437 -- 46th Court West

City

Bradenton

State

FL

Zip Code

34210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 0 8

Transaction ID: C4942615

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

22750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 39

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Alliant Techsystems, Inc. Employee PAC

Mailing Address 1215 South Clark Street
#1510 Crystal Gateway 3

City State Zip Code
Arlington VA 22202

FEC ID number of contributing
federal political committee.

C C00250209

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C4971786

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Boeing Political Action Committee

Mailing Address 1200 Wilson Blvd

City State Zip Code
Arlington VA 22209

FEC ID number of contributing
federal political committee.

C C00142711

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 0 8

Transaction ID: C4952234

Amount of Each Receipt this Period

3500.00

C.

Full Name (Last, First, Middle Initial)

Honeywell International PAC

Mailing Address 101 Constitution Ave NW, Suite 500

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C4971791

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 39

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Radiation Therapy Sevices PAC

Mailing Address 2234 Colonial Blvd.

City

State

Zip Code

Fort Myers

FL

33907

FEC ID number of contributing
federal political committee.

C C00385120

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 9 / 2 0 0 8

Transaction ID: C4945583

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Sheet Metal Workers' International Association PAC

Mailing Address 1750 New York Avenue NW

City

State

Zip Code

Washington

DC

20006

FEC ID number of contributing
federal political committee.

C C00007542

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 8

Transaction ID: C4956579

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

US Cuba Democracy PAC

Mailing Address 1200 W. 49th St.

City

State

Zip Code

Hialeah

FL

33012

FEC ID number of contributing
federal political committee.

C C00387720

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 8

Transaction ID: C4952235

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

20500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
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| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | |
|-----------|---|---|
| A. | <p>Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 8220</p> <p>City Aurora State IL Zip Code 60572-8220</p> <p>Purpose of Disbursement Phone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D220352 Date of Disbursement <div>07 / 21 / 2008</div> </p> <p>Amount of Each Disbursement this Period <div>93.90</div> </p> |
| B. | <p>Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 8220</p> <p>City Aurora State IL Zip Code 60572-8220</p> <p>Purpose of Disbursement Phone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D222711 Date of Disbursement <div>08 / 19 / 2008</div> </p> <p>Amount of Each Disbursement this Period <div>93.90</div> </p> |
| C. | <p>Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 8220</p> <p>City Aurora State IL Zip Code 60572-8220</p> <p>Purpose of Disbursement Phone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D225719 Date of Disbursement <div>09 / 26 / 2008</div> </p> <p>Amount of Each Disbursement this Period <div>89.51</div> </p> |

SUBTOTAL of Disbursements This Page (optional)

277.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) Auditech Associates, LLC | Transaction ID: D222955 Date of Disbursement |
| Mailing Address 500 Red Sail Way | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 8</div> </div> |
| City State Zip Code Satellite Beach FL 32937 Purpose of Disbursement Compliance Consulting Candidate Name | Amount of Each Disbursement this Period <div>3500.00</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <div>001</div> Category/ Type |
| B. Full Name (Last, First, Middle Initial) Auditech Associates, LLC | Transaction ID: D220966 Date of Disbursement |
| Mailing Address 500 Red Sail Way | <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 1 / 2 0 0 8</div> </div> |
| City State Zip Code Satellite Beach FL 32937 Purpose of Disbursement Compliance Consulting Candidate Name | Amount of Each Disbursement this Period <div>3500.00</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <div>001</div> Category/ Type |
| C. Full Name (Last, First, Middle Initial) Auditech Associates, LLC | Transaction ID: D217086 Date of Disbursement |
| Mailing Address 500 Red Sail Way | <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 0 8</div> </div> |
| City State Zip Code Satellite Beach FL 32937 Purpose of Disbursement Compliance Consulting Candidate Name | Amount of Each Disbursement this Period <div>3500.00</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <div>001</div> Category/ Type |

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) AWF Consulting, Inc. | Transaction ID: D222745 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 426 C Street, NE | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 2 | 0 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 2 | 0 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Internet & cable service Candidate Name | <table border="1"> <tr> <td colspan="10">52.87</td> </tr> </table> | 52.87 | | | | | | | | | | | | | | | | | | | |
| 52.87 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Bright House | Transaction ID: D222956 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 628071 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 1 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 1 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Orlando State FL Zip Code 32862-8071 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Internet Candidate Name | <table border="1"> <tr> <td colspan="10">118.61</td> </tr> </table> | 118.61 | | | | | | | | | | | | | | | | | | | |
| 118.61 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Bright House | Transaction ID: D220959 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 628071 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 2 | 9 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 2 | 9 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Orlando State FL Zip Code 32862-8071 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Internet Candidate Name | <table border="1"> <tr> <td colspan="10">117.03</td> </tr> </table> | 117.03 | | | | | | | | | | | | | | | | | | | |
| 117.03 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

288.51

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Capital Associates | Transaction ID: D217085 Date of Disbursement |
| Mailing Address 426 - C Street NE | <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 0 8</div> </div> |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Rent & Utilities Candidate Name | <div> <div>223.13</div> <div>001 Category/ Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Capital Associates | Transaction ID: D220963 Date of Disbursement |
| Mailing Address 426 - C Street NE | <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 1 / 2 0 0 8</div> </div> |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Rent & Utilities Candidate Name | <div> <div>223.13</div> <div>001 Category/ Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Capital Associates | Transaction ID: D222951 Date of Disbursement |
| Mailing Address 426 - C Street NE | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 8</div> </div> |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Rent & Utilities Candidate Name | <div> <div>223.13</div> <div>001 Category/ Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

669.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee | Transaction ID: D218250 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 120 Maryland Ave., NE | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 0 | 4 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 0 | 4 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Room Rental Candidate Name DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE | <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table> | 250.00 | | | | | | | | | | | | | | | | | | | |
| 250.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | Category/Type 003 | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Florida Democratic Party | Transaction ID: D225994 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 214 South Bronough Street | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 2 | 2 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 2 | 2 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Tallahassee State FL Zip Code 32301 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Catering Dem. Convention Candidate Name | <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table> | 2000.00 | | | | | | | | | | | | | | | | | | | |
| 2000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | Category/Type 007 | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Ms. Alicia Johnson | Transaction ID: D222950 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 185 Freeman Street #751 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 1 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 1 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Brookline State MA Zip Code 02446 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fundraising Consultant Candidate Name | <table border="1"> <tr> <td colspan="10">3230.00</td> </tr> </table> | 3230.00 | | | | | | | | | | | | | | | | | | | |
| 3230.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | Category/Type 001 | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

5480.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Ms. Alicia Johnson

Mailing Address 185 Freeman Street #751

City Brookline State MA Zip Code 02446

Purpose of Disbursement
Fundraising Consultant

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D217084

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

3230.00

B.

Full Name (Last, First, Middle Initial)

Ms. Alicia Johnson

Mailing Address 185 Freeman Street #751

City Brookline State MA Zip Code 02446

Purpose of Disbursement
Fundraising Consultant

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D220961

Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

3230.00

C.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address 6105 North Wickham Road

City Melbourne State FL Zip Code 32940

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D218506

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

8.00

SUBTOTAL of Disbursements This Page (optional)

6468.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
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| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Postmaster | Transaction ID: D223303 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 6105 North Wickham Road | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 2 | 7 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 2 | 7 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Melbourne State FL Zip Code 32940 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Postage Candidate Name | <table border="1"> <tr> <td colspan="10">15.75</td> </tr> </table> | 15.75 | | | | | | | | | | | | | | | | | | | |
| 15.75 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) SunTrust | Transaction ID: D223702 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 3926 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 3 | 1 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 3 | 1 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Tallahassee State FL Zip Code 32315-3926 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Bank Fees Candidate Name | <table border="1"> <tr> <td colspan="10">150.56</td> </tr> </table> | 150.56 | | | | | | | | | | | | | | | | | | | |
| 150.56 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) SunTrust | Transaction ID: D226609 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 3926 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Tallahassee State FL Zip Code 32315-3926 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Bank Fees Candidate Name | <table border="1"> <tr> <td colspan="10">511.32</td> </tr> </table> | 511.32 | | | | | | | | | | | | | | | | | | | |
| 511.32 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

677.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | | | | | | | | | | | | | | | | | | | | | |
|--|--|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--------|
| A. Full Name (Last, First, Middle Initial) SunTrust <hr/> Mailing Address PO Box 3926 | Transaction ID: D221463 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 3 | 0 | | 2 | 0 | 0 | 8 | |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 3 | 0 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| City Tallahassee State FL Zip Code 32315-3926 Purpose of Disbursement Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Amount of Each Disbursement this Period <table border="1"> <tr> <td>61.90</td> </tr> </table> 001 Category/ Type | 61.90 | | | | | | | | | | | | | | | | | | | | |
| 61.90 | | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address PO Box 17577 City Baltimore State MD Zip Code 21297-0513 Purpose of Disbursement Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D219723 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>170.72</td> </tr> </table> 001 Category/ Type | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 4 | | 2 | 0 | 0 | 8 | 170.72 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 1 | 4 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| 170.72 | | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address PO Box 17577 City Baltimore State MD Zip Code 21297-0513 Purpose of Disbursement Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D225718 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>159.07</td> </tr> </table> 001 Category/ Type | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 2 | 6 | | 2 | 0 | 0 | 8 | 159.07 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 9 | | 2 | 6 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| 159.07 | | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

391.69

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 17577 | Transaction ID: D222694 Date of Disbursement <div> <div>08</div> <div>19</div> <div>2008</div> </div> |
| City Baltimore State MD Zip Code 21297-0513 Purpose of Disbursement Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Amount of Each Disbursement this Period <div>177.69</div> <div>001</div> Category/ Type |
| B. Full Name (Last, First, Middle Initial) SunTrust BankCard Mailing Address PO Box 791250 City Baltimore State MD Zip Code 21279 Purpose of Disbursement SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D217983 Date of Disbursement <div> <div>07</div> <div>03</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>569.01</div> <div></div> Category/ Type |
| C. Full Name (Last, First, Middle Initial) La Prima Catering Mailing Address 5105 Berwyn Road, Ste 101 City College Park State MD Zip Code 20740 Purpose of Disbursement Event Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D217985 Date of Disbursement <div> <div>07</div> <div>03</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>445.76</div> <div>003</div> Category/ Type [MEMO ITEM] |

SUBTOTAL of Disbursements This Page (optional)

746.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Postmaster | Transaction ID: D217984 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 2 Mass Ave., NE | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 0 | 3 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 0 | 3 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Postage | <table border="1"> <tr> <td>32.40</td> </tr> </table> | 32.40 | | | | | | | | | | | | | | | | | | | |
| 32.40 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type | 001 | | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Shoppers Club | Transaction ID: D217986 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 3801 Jefferson Davis Hwy | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 0 | 3 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 0 | 3 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Alexandria State VA Zip Code 22305-3118 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Event Beverages | <table border="1"> <tr> <td>90.85</td> </tr> </table> | 90.85 | | | | | | | | | | | | | | | | | | | |
| 90.85 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type | 003 | | | | | | | | | | | | | | | | | | | |
| 003 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Ms. Alicia Johnson | Transaction ID: D220967 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 185 Freeman Street #751 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 1 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 1 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Brookline State MA Zip Code 02446 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement SEE BELOW | <table border="1"> <tr> <td>13.00</td> </tr> </table> | 13.00 | | | | | | | | | | | | | | | | | | | |
| 13.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td></td> </tr> </table> Category/ Type | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

13.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) New York Taxi | Transaction ID: D220968 Date of Disbursement |
| Mailing Address 5050 Broadway | <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 1 / 2 0 0 8</div> </div> |
| City New York State NY Zip Code 10001 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Taxi | <div>13.00</div> |
| Candidate Name | <div>002</div> <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] |
| B. Full Name (Last, First, Middle Initial) SunTrust BankCard | Transaction ID: D221402 Date of Disbursement |
| Mailing Address PO Box 791250 | <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 0 8</div> </div> |
| City Baltimore State MD Zip Code 21279 | Amount of Each Disbursement this Period |
| Purpose of Disbursement SEE BELOW | <div>5110.13</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] |
| C. Full Name (Last, First, Middle Initial) AmTrack | Transaction ID: D221414 Date of Disbursement |
| Mailing Address Penn Station | <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 0 8</div> </div> |
| City New York State NY Zip Code 10001 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel Credit | <div>-23.40</div> |
| Candidate Name | <div>002</div> <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] |

SUBTOTAL of Disbursements This Page (optional)

5110.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) Amtrak Mailing Address Union Station, 50 Massachussets Av | Transaction ID: D221406 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 0 8</div> </div> |
| City Washington State DC Zip Code 20002 Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Amount of Each Disbursement this Period <div>258.00</div> [MEMO ITEM] |
| B. Full Name (Last, First, Middle Initial) Au Bon Pain Catering Mailing Address 800 North Capitol Street NW City Washington State DC Zip Code 20002 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D221407 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>7.13</div> [MEMO ITEM] |
| C. Full Name (Last, First, Middle Initial) Carey International, Inc. Mailing Address 91 Northwest St. City Annapolis State MD Zip Code 21401 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D221410 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>216.83</div> [MEMO ITEM] |

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Carey International, Inc. | Transaction ID: D221411 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 91 Northwest St. | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Annapolis State MD Zip Code 21401 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel | <table border="1"> <tr> <td colspan="10">177.70</td> </tr> </table> | 177.70 | | | | | | | | | | | | | | | | | | | |
| 177.70 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type | 002 | | | | | | | | | | | | | | | | | | | |
| 002 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Hyatt Hotels | Transaction ID: D221408 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address East 44th Street | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City New York State NY Zip Code 10017 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Copies | <table border="1"> <tr> <td colspan="10">4.34</td> </tr> </table> | 4.34 | | | | | | | | | | | | | | | | | | | |
| 4.34 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type | 003 | | | | | | | | | | | | | | | | | | | |
| 003 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) J2* Fax Broadcast System | Transaction ID: D221403 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 6922 Hollywood Blvd., Suite 900 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Hollywood State CA Zip Code 90028 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fax | <table border="1"> <tr> <td colspan="10">150.00</td> </tr> </table> | 150.00 | | | | | | | | | | | | | | | | | | | |
| 150.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type | 001 | | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 39

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

A.

Full Name (Last, First, Middle Initial)
Metro North Commuter Railroad

Mailing Address 347 Madison Avenue Bsmt

City State Zip Code
New York NY 10017

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D221409

Date of Disbursement

08 / 09 / 2008

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
New York Yankees

Mailing Address 161st Street & River Ave.

City State Zip Code
Bronx NY 10451

Purpose of Disbursement
Fundraising Expense

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D221405

Date of Disbursement

08 / 09 / 2008

Amount of Each Disbursement this Period

4200.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address 2 Mass Ave., NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement
Postage

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D221412

Date of Disbursement

08 / 09 / 2008

Amount of Each Disbursement this Period

68.02

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 39

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Postmaster | Transaction ID: D221413 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 6105 North Wickham Road | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Melbourne State FL Zip Code 32940 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Postage | <table border="1"> <tr> <td colspan="10">1.51</td> </tr> </table> | 1.51 | | | | | | | | | | | | | | | | | | | |
| 1.51 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type | 001 | | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) WMATA Express Vendor | Transaction ID: D221404 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 600 5th St NW | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20001-2610 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel | <table border="1"> <tr> <td colspan="10">40.00</td> </tr> </table> | 40.00 | | | | | | | | | | | | | | | | | | | |
| 40.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type | 002 | | | | | | | | | | | | | | | | | | | |
| 002 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Ms. Alicia Johnson | Transaction ID: D221415 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 185 Freeman Street #751 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Brookline State MA Zip Code 02446 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement SEE BELOW | <table border="1"> <tr> <td colspan="10">266.00</td> </tr> </table> | 266.00 | | | | | | | | | | | | | | | | | | | |
| 266.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type | 002 | | | | | | | | | | | | | | | | | | | |
| 002 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

266.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 39

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|-------------------|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) US Airways | Transaction ID: D226603 | | | | | | | | | | | | | | | | | | | | |
| Date of Disbursement | Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 66100 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 9 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Winston Salem State NC Zip Code 27102 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel for PAC event | <table border="1"> <tr> <td colspan="10">266.00</td> </tr> </table> | 266.00 | | | | | | | | | | | | | | | | | | | |
| 266.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>002</td> </tr> <tr> <td>Category/ Type</td> </tr> </table> | 002 | Category/ Type | | | | | | | | | | | | | | | | | | |
| 002 | | | | | | | | | | | | | | | | | | | | | |
| Category/ Type | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) SunTrust BankCard | Transaction ID: D223674 | | | | | | | | | | | | | | | | | | | | |
| Date of Disbursement | Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 791250 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Baltimore State MD Zip Code 21279 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement SEE BELOW | <table border="1"> <tr> <td colspan="10">1555.68</td> </tr> </table> | 1555.68 | | | | | | | | | | | | | | | | | | | |
| 1555.68 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td></td> </tr> <tr> <td>Category/ Type</td> </tr> </table> | | Category/ Type | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| Category/ Type | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) City Market | Transaction ID: D223680 | | | | | | | | | | | | | | | | | | | | |
| Date of Disbursement | Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 260 Beaver Creek Place | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Avon State CO Zip Code 81620 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel | <table border="1"> <tr> <td colspan="10">65.23</td> </tr> </table> | 65.23 | | | | | | | | | | | | | | | | | | | |
| 65.23 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>002</td> </tr> <tr> <td>Category/ Type</td> </tr> </table> | 002 | Category/ Type | | | | | | | | | | | | | | | | | | |
| 002 | | | | | | | | | | | | | | | | | | | | | |
| Category/ Type | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

1555.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 39

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Denver Airport Vendor | Transaction ID: D223678 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address Denver International Airport | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Arvada State CO Zip Code 80002 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel | <table border="1"> <tr> <td colspan="10">28.00</td> </tr> </table> | 28.00 | | | | | | | | | | | | | | | | | | | |
| 28.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type | 002 | | | | | | | | | | | | | | | | | | | |
| 002 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) New York Yankees | Transaction ID: D223675 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 161st Street & River Ave. | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Bronx State NY Zip Code 10451 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Tickets Fundraising | <table border="1"> <tr> <td colspan="10">960.00</td> </tr> </table> | 960.00 | | | | | | | | | | | | | | | | | | | |
| 960.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type | 003 | | | | | | | | | | | | | | | | | | | |
| 003 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Office Depot | Transaction ID: D223681 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 6729 Colonnade Avenue | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 5 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Viera State FL Zip Code 32940 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Office Supplies Credit | <table border="1"> <tr> <td colspan="10">-37.10</td> </tr> </table> | -37.10 | | | | | | | | | | | | | | | | | | | |
| -37.10 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type | 001 | | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Office Depot

Mailing Address 6729 Colonnade Avenue

City Viera State FL Zip Code 32940

Purpose of Disbursement
Office Supplies

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D223682

Date of Disbursement

09 / 05 / 2008

Amount of Each Disbursement this Period

150.49

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address 2 Mass Ave., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D223676

Date of Disbursement

09 / 05 / 2008

Amount of Each Disbursement this Period

51.60

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address 2 Mass Ave., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D223684

Date of Disbursement

09 / 05 / 2008

Amount of Each Disbursement this Period

66.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) Splendido Cafe | Transaction ID: D223679 Date of Disbursement |
| Mailing Address 17 Chateau Lane | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 5 / 2 0 0 8</div> </div> |
| City Avon State CO Zip Code 81620 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel | <div>191.22</div> |
| Candidate Name | <div>002</div> <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] |
| B. Full Name (Last, First, Middle Initial) Symantec Corporation | Transaction ID: D223683 Date of Disbursement |
| Mailing Address 20330 Stevens Creek Blvd. | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 5 / 2 0 0 8</div> </div> |
| City Cupertino State CA Zip Code 95014 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Software | <div>59.99</div> |
| Candidate Name | <div>001</div> <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] |
| C. Full Name (Last, First, Middle Initial) Yellow Cab Company of D.C., Inc. | Transaction ID: D223677 Date of Disbursement |
| Mailing Address 1636 Bladensburg Rd., NE | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 5 / 2 0 0 8</div> </div> |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel | <div>20.25</div> |
| Candidate Name | <div>002</div> <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] |

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Mr. Peter Mitchell | Transaction ID: D225995 Date of Disbursement |
| Mailing Address 1826 Vineyard Way | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div> |
| City Tallahassee State FL Zip Code 32317-7923 | Amount of Each Disbursement this Period |
| Purpose of Disbursement SEE BELOW | <div>2835.40</div> |
| Candidate Name | <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) A.T.S. Limo | Transaction ID: D226006 Date of Disbursement |
| Mailing Address 437 S Logan St | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div> |
| City Denver State CO Zip Code 80209 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel PAC Hosting | <div>10.50</div> |
| Candidate Name | <div>002 Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Freedom Cabs, Inc. | Transaction ID: D226005 Date of Disbursement |
| Mailing Address 6030 Smith Rd. | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div> |
| City Denver State CO Zip Code 80216 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel PAC Hosting | <div>11.00</div> |
| Candidate Name | <div>002 Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

2835.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) Marriott Hotels | Transaction ID: D225996 Date of Disbursement |
| Mailing Address 150 Clayton Lane | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div> |
| City State Zip Code Denver CO 80206 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel for PAC Hosting | <div>2292.40</div> |
| Candidate Name | <div>002</div> <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] |
| B. Full Name (Last, First, Middle Initial) Metro Taxi | Transaction ID: D225998 Date of Disbursement |
| Mailing Address 5909 E 38 Ave | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div> |
| City State Zip Code Denver CO 80207 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel PAC Hosting | <div>12.00</div> |
| Candidate Name | <div>002</div> <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] |
| C. Full Name (Last, First, Middle Initial) Metro Taxi | Transaction ID: D225999 Date of Disbursement |
| Mailing Address 5909 E 38 Ave | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div> |
| City State Zip Code Denver CO 80207 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Travel PAC Hosting | <div>12.00</div> |
| Candidate Name | <div>002</div> <div>Category/Type</div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] |

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | |
|--|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Metro Taxi</p> <p>Mailing Address 5909 E 38 Ave</p> <p>City Denver State CO Zip Code 80207</p> <p>Purpose of Disbursement Travel PAC Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D226000</p> <p>Date of Disbursement <div> <div>09</div> <div>30</div> <div>2008</div> </div> </p> <p>Amount of Each Disbursement this Period <div>12.00</div> </p> <p>[MEMO ITEM]</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666-0100</p> <p>Purpose of Disbursement Travel for PAC Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D225997</p> <p>Date of Disbursement <div> <div>09</div> <div>30</div> <div>2008</div> </div> </p> <p>Amount of Each Disbursement this Period <div>396.00</div> </p> <p>[MEMO ITEM]</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Yellow Cab Company</p> <p>Mailing Address 7500 E. 41st Ave.</p> <p>City Denver State CO Zip Code 80216</p> <p>Purpose of Disbursement Travel PAC Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D226001</p> <p>Date of Disbursement <div> <div>09</div> <div>30</div> <div>2008</div> </div> </p> <p>Amount of Each Disbursement this Period <div>11.00</div> </p> <p>[MEMO ITEM]</p> |

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Yellow Cab Company | Transaction ID: D226002 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 7500 E. 41st Ave. | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City State Zip Code Denver CO 80216 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel PAC Hosting Candidate Name | <table border="1"> <tr> <td colspan="10">55.00</td> </tr> </table> | 55.00 | | | | | | | | | | | | | | | | | | | |
| 55.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Yellow Cab Company | Transaction ID: D226003 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 7500 E. 41st Ave. | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City State Zip Code Denver CO 80216 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel PAC Hosting Candidate Name | <table border="1"> <tr> <td colspan="10">12.00</td> </tr> </table> | 12.00 | | | | | | | | | | | | | | | | | | | |
| 12.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Yellow Cab Company | Transaction ID: D226004 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 7500 E. 41st Ave. | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City State Zip Code Denver CO 80216 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Travel PAC Hosting Candidate Name | <table border="1"> <tr> <td colspan="10">11.50</td> </tr> </table> | 11.50 | | | | | | | | | | | | | | | | | | | |
| 11.50 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | [MEMO ITEM] | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

35279.44

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Moving America Forward

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee | Transaction ID: D224693 Date of Disbursement |
| Mailing Address 120 Maryland Ave., NE | <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 7 / 2 0 0 8</div> </div> |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Political Contribution Candidate Name DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE | <div> <div>5000.00</div> <div>011 Category/ Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |
| B. Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee | Transaction ID: D222741 Date of Disbursement |
| Mailing Address 120 Maryland Ave., NE | <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 0 / 2 0 0 8</div> </div> |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Political contribution Candidate Name DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE | <div> <div>5000.00</div> <div>011 Category/ Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |
| C. Full Name (Last, First, Middle Initial) HILL PAC | Transaction ID: D220350 Date of Disbursement |
| Mailing Address 1133 Connecticut Avenue N.W. Suite 300 | <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 1 / 2 0 0 8</div> </div> |
| City Washington State DC Zip Code 20036 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Political Contribution Candidate Name HILL PAC | <div> <div>2500.00</div> <div>011 Category/ Type</div> </div> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | |

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 / 39

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Moving America Forward**A.** Full Name (Last, First, Middle Initial)
HAGAN SENATE COMMITTEE INC

Mailing Address PO BOX 29103

City Greensboro State NC Zip Code 27429

Purpose of Disbursement
Political ContributionCandidate Name
Kay Hagan011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ President
State: NC District:
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D226031

Date of Disbursement

M M / D D / Y Y Y Y
09 / 30 / 2008

Amount of Each Disbursement this Period

3000.00

B. Full Name (Last, First, Middle Initial)
MARK UDALL FOR CONGRESS INC.

Mailing Address 8690 Wolff Court #200

City Westminster State CO Zip Code 80031

Purpose of Disbursement
Political contributionCandidate Name
Mark Udall011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: CO District: 02
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D222693

Date of Disbursement

M M / D D / Y Y Y Y
08 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
MUSGROVE FOR U S SENATEMailing Address 600 CONCOURSE SUITE 100
1076 HIGHLAND COLONY PARKWAY

City RIDGELAND State MS Zip Code 39157

Purpose of Disbursement
Political ContributionCandidate Name
David Ronald Musgrove011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ President
State: MI District:
Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D224688

Date of Disbursement

M M / D D / Y Y Y Y
09 / 17 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

10500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 / 39

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Moving America Forward

A.

Full Name (Last, First, Middle Initial)

NEBRASKANS FOR KLEEB

Mailing Address PO Box 1444

City
Hastings

State
NE

Zip Code
68901

Purpose of Disbursement
Political Contribution

Candidate Name
Scott Michael Kleeb

Office Sought: ☐ House
☒ Senate
☐ President

State: NE

District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: D226032

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

25000.00

Form/Schedule: **F3XN**

Transaction ID:

Please note: 1. ☐ All expenditures for Fundraising Event Expense, Fundraising Consultant, Catering and Fundraising on Schedule B were made for general PAC fundraising purposes and not in behalf of any particular candidate. 2. ☐ Regarding Administrative Expenses: a. ☐ All payments to a person aggregating in excess of \$200 in a calendar year are disclosed on Schedule B supporting Line 21(b) of the Detail Summary Page. b. ☐ The Moving America Forward PAC does not have any employees. Consultants are used to raise money, administer the PAC, and for compliance reporting. c. ☐ No expenditures are being paid by a connected organization d. ☐ No expenses were incurred but not paid during the reporting period. e. ☐ No in-kind contributions were provided during the reporting period. f. ☐ All expenses have been adequately disclosed. No volunteers have provided any services listed as administrative expenses during this reporting period. g. ☐ The report did not contain any in-kind contributions. The Detailed Summary Page contains an accurate accounting of contributions to federal candidates.